

PTO/SB/21
0036.0039

C2C

TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>	Application Number	09/409,633 6865679
	Filing Date	October 1, 1999
	Inventor	C.M. Dennison
	Group Art Unit	2137
Examiner Name	Courtney D. Fields.	
Total Number of Pages in this Submission: 2	Attorney Docket Number	BO999025

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits /Declarations <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; ___ references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input type="checkbox"/> Formal Drawings: ___ sheets <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition: _____ <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, and/or Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ___ <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Certificate of Correction of Applicant's Mistake (37 CFR 1.323) <input checked="" type="checkbox"/> Certificate of Correction of Office Mistake (37 CFR 1.322) <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>)
--	---	--

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name:	David W. Victor, Registration No. 39,867	Certificate
Signature:		NOV 02 2005
Date:	October 26, 2005	of Correction
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983		<input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiency of fees, or credit any overpayment, to Deposit Account No. 50-0563

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.		
Typed or Printed name:	David W. Victor	Customer No. 46918
Signature:		
Date:	October 26, 2005	

NOV - 7 2005

0036.0039

UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF CORRECTION

PATENT NO.: 6,865,679

DATED: March 8, 2005

INVENTOR(S): Carl Michael Dennison

It is certified that error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Column 7

Line 50, after "server;" insert -- and -- .

Line 65, delete "saver" and insert -- server -- .

Column 9

Line 59, delete "servo" and insert -- server -- .

SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450.

MAILING ADDRESS OF SENDER:

Konrad Raynes & Victor, LLP
315 S. Beverly Drive, Suite 210
Beverly Hills, CA 90212

PATENT NO:
6,865,679

NOV - 7 2005